

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000970

FILED  
Sep 17, 2009  
Secretary of State

Entity Name: UNIVERSITY HEALTH INDUSTRIES, INC.

## Current Principal Place of Business:

950 PENINSULA CORPORATE CIRCLE, SUITE 3022  
BOCA RATON, FL 33487

## New Principal Place of Business:

B2-125 THE QUEENSWAY  
122  
ETOBICOKE, ON M8Y1H6 CA

## Current Mailing Address:

950 PENINSULA CORPORATE CIRCLE, SUITE 3022  
BOCA RATON, FL 33487

## New Mailing Address:

B2-125 THE QUEENSWAY  
122  
ETOBICOKE, ON M8Y1H6

FEI Number: 65-1081054

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MORROW, JARRET  
950 PENINSULA CORPORATE CIRCLE  
SUITE 3022  
BOCA RATON, FL 33487 US

## Name and Address of New Registered Agent:

CORPORATION SERVICE CO.  
1201 HAYS STREET  
TALAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CORPORATION SERVICE CO.

09/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: PELOSO, DEAN  
Address: 950 PENINSULA CORP CIRCLE, SUITE 3022  
City-St-Zip: BOCA RATON, FL 33487

Title: PRES (X) Delete  
Name: MORROW, JARRET  
Address: 950 PENINSULA CORP CIRCLE, SUITE 3022  
City-St-Zip: BOCA RATON, FL 33487

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition  
Name: HAMILTON, JAMES R  
Address: B2-125 THE QUEENSWAY SUITE122  
City-St-Zip: ETOBICOKE, ON M8Y1H6 CA

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES R HAMILTON

DIR

09/17/2009

Electronic Signature of Signing Officer or Director

Date